

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

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UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ILLINOIS

FEB 0 4 2020 76

THOMAS G. BRUTON CLERK, U.S. DISTRICT COURT

(Enter above the full name of the plaintiff or plaintiffs in this action) vs.	1:20-cv-00819 Judge Martha M. Pacold Magistrate Judge Sidney I. Schenkier PC 11 Case No:
Skokie Criminal Court	(To be supplied by the <u>Clerk of this Court</u>)
house	-
(Enter above the full name of ALL defendants in this action. <u>Do not use "et al."</u>)	
CHECK ONE ONLY:	
	R THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983 y, or municipal defendants)
	THE CONSTITUTION ("BIVENS" ACTION), TITLE G. Code (federal defendants)
OTHER (cite statute, if	known)

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.•	Plaintiff(s):		
	A.	Name: Joseph Gordon	
15	B.	List all aliases:	
	C.	Prisoner identification number: 20151230057	
	D.	Place of present confinement:	
٠	E.	Address: 26 and California	
	(If there is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D number, place of confinement, and current address according to the above format on separate sheet of paper.)		
II.	Defendant(s): (In A below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in B and C .)		
	Α.	Defendant: Skokie Officers	
		Title: Correctional Officers	
		Place of Employment: SKOKIE Criminal Court building	
	B.	Defendant:	
		Title:	
		Place of Employment:	
	C.	Defendant:	
		Title:	
		Place of Employment:	
		u have more than three defendants, then all additional defendants must be listed ling to the above format on a separate sheet of paper.)	

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List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal

III.

A.	Name of case and docket number:
В.	Approximate date of filing lawsuit:
C.	List all plaintiffs (if you had co-plaintiffs), including any aliases:
D.	List all defendants:
E.	Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county):
F.	Name of judge to whom case was assigned:
G.	Basic claim made:
Н.	Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?):
I.	Approximate date of disposition:

YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-

PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

On Dec. 3, 2019, I had court, and I told the Staff at Skokie that
I was being endangered by immates, and to switch bull pen, but they
refused my request and put me in there anyway. I was approached
by two inmates telling me that they wanted my lunch, I refused and one
of them Runched me that's when the fight Started for at least 6 minutes
until a goard showed up just to drop of another inmate in the cage I
tried to get his attention but all he did was leave, that's when they
Started up again for another 6 minutes. I did Not recieve medical
attention until I made it back to cook county, that's when I went to
Stroger Hospital, I suffer from a broken nose and several cuts in
my left eye which led to temporary blindness and a permanent black
ring. I did one week in medical now im back in population, waiting
on glasses for my blurred vision.

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V. Relief:	
State brief no cases o	ly exactly what you want the court to do for you. Make no legal arguments. Cite r statutes.
as around anon	and the distance to me to make the morey for
the damages	done for my eyes and nose. 1,000,000 \$
VI. The plaint	iff demands that the case be tried by a jury. YES NO
	CERTIFICATION
	By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.
	Signed this 20 day of 000 , 2019
	Joseph Gordon
	(Signature of plaintiff or plaintiffs)
	Joseph Gordon
	(Print name)
	2015 12200 ==
	(ID Number)
	(I.D. Number)
	4848 N. Winthrop
	· · · · · · · · · · · · · · · · · · ·
	(Address)
	(Address)

Jo Seph Gordon #2015-1230057 P.O. Box 089002 Chicago, IL, 60608

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Prisoner Correspondent
United States District Court
219 S. Dearborn Street,
20th floor, Chicago IL 60604





Magistrate Judge Sidney I. Schenkier

Judge Martha M. Pacold

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